

Book Review

“Acupuncture Core Therapy – Shakuju Chiryō”

Written by Shoji Kobayashi and Translated by Dan Kenner

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Acupuncture Core Therapy (ACT) is the culmination of over 30 years of study and clinical experience by Shoji Kobayashi and his first book translated into English. Kobayashi Sensei explains his unique style of Japanese acupuncture, starting with a discussion of its roots in classical Chinese and Japanese medicine and ending with a presentation of treatment protocol.

In the west, ACT is referred to as *Shakuju* Therapy (SJT) and I will use SJT to refer to this style of acupuncture.

I will offer a brief overview, shed light on *Shakuju* Therapy, summarize SJT's key concepts and show how these concepts work clinically. I recommend reading Acupuncture Core Therapy along with its companion DVD. Attending a SJT seminar is another way to learn more. Contacts for purchasing Acupuncture Core Therapy and its companion DVD and for SJT seminars can be found at the end of the article.

An Explanation of Cold (*hie*)

The concepts of *qi* and *yin-yang* form the foundation of SJT, as in other styles of acupuncture. However, SJT also asserts that disease or disharmony stems from fundamental *jing qi* deficiency or pathological cold/*hie*. The cold/*hie* extends the concept of *yin qi* deficiency. It embodies the sensation of physical cold to include a more fundamental concept of *jing qi* deficiency.

How does cold/*hie* and the concept of *jing qi* deficiency manifest? Over the course of one's life, there is a slow but steady depletion of *jing qi*. During times of good health, the body can maintain warmth reasonably well, until near

death, where cold steadily overcomes the body and systems breakdown. Upon death, *jing qi* becomes so depleted that the body becomes very cold. When we suffer from an imbalanced state, even before pathology manifests, a gradual depletion of *jing qi* also takes place. Left untreated, *jing qi* depletion can lead to disease. Cold accelerates the normal, more gradual depletion of *jing qi*, and in cases of serious disease, the outcome can be rapid leading to a total decline of *jing qi* or death.

The goal of SJT treatment is to return the body to a state of normal expenditure of *jing qi* to insure a normal, healthy lifespan.

A Unique Diagnostic Approach

In SJT, cold manifests as imbalance, congestion or stagnation of *qi* and blood which is termed *shakuju*, or “accumulations (*shaku* – deeper)” and “gatherings (*ju* – more superficial).” Diagnostically, the *shakuju* pattern is primarily determined from areas of hardness, pulsations and discomfort/pain on the palpated abdomen. The deeper the congestion or *shaku*, the more complex or serious the disharmony. See Exhibit A for division of Abdominal Five Phase Zones.

SJT provides a unique symptom and sign pattern classification used in evaluation of the patient's condition. This breaks from Traditional Chinese medicine symptom-sign complexes with conventional disease names. As noted before, SJT predisposes that the root of disharmony or disease is *jing qi* or *yin* deficiency. To understand disease patterns, the broader concept of *jing qi/yin* deficiency is explained within the context of vacuity (deficiency) and repletion (excess) and the yin-yang paradigm. SJT groups these terms into five symptom categories that can classify any pathological condition. They are in progression of severeness: (1) *yin* deficiency, (2) *yang* excess, (3) *yin* excess, (4) *yin* and *yang* excess, and (5) *yang* deficiency. The symptoms and signs within each

category are determined through consultation and examination of the patient. While beyond the scope of this introduction, please keep in mind that they reflect various degrees of *yin* or *jing qi* deficiency.

Shaku Ju Therapy Treatment

Kobayashi Sensei's takes this concept of cold and offers a comprehensive, yet relatively simple root treatment to restore body/mind/spirit balance. His treatment protocol is typically applied to four of the five treatment zones mapped on the back.

SJT treatment strives to correct the energetic imbalances by warming the cold in the body, or putting power (tonifying) into the *jing qi*. The treatment follows a series of systematic steps to both diagnose and treat the pattern of imbalance (*shaku*). It starts by working to correct the superficial imbalance, or *ju*, then moving deeper to rectify the core level of disharmony, or *shaku*. Diagnosis requires that the practitioner remain aware to past medical history and observational stimuli, ranging from such things as birth trauma to what the patient looks like to how he/she sounds and feels through palpation.

Treatment entails a high degree of focused intention and connection between the practitioner's and patient's fundamental core energy or consciousness. This feature to SJT cannot be overstated. ACT clearly explains the fundamentals of directing consciousness in concrete terms. ACT also offers easily understood and fundamental suggestions in how to cultivate *qi* through exercises, such as *qi gong* practices.

In treatment, a practitioner uses single needle (or *teishin*) and moxibustion to warm the body. The needle helps "gather" *qi*, resulting in a more balanced state of being, and ultimately revitalizes *jing qi*. Most needling with SJT is non-insertive by virtue of the technique. Because it is so gentle,

SJT is especially appropriate for children, seniors, patients with chronic conditions and the needle-phobic. Moxibustion is used when *qi* is in short supply or when cold or illness is more serious. In these cases, moxibustion helps gather heat externally.

Treatment steps are briefly outlined below:

1. Observation and inquiry
2. Initial pulse analysis
3. Check reference points (supine position: inner leg region)
4. Contact needling of the abdomen
5. Pulse diagnosis and adjustment
6. Abdominal palpation and pattern diagnosis
7. Check reference points (prone position: primarily jaw, back, neck, legs and feet)
8. Contact needling of back
9. Treatment of back-*shū* points
10. Re-examination of the abdomen (palpate for positive changes)
11. Supplemental treatment (if needed)
12. Re-examination of pulses
13. Treatment of shoulder region (GB-21/TW-15 area) in seated position

The needle used in SJT treatments consists of a #3, 40mm SJ-type filiform needle with an oval-shaped point, designed by Kobayashi Sensei. This blunted point allows for painless assessment and stimulation in contact needling and of individual acu-points. Treated back-*shū* points generally follow the outer/inner Bladder lines, the *Huatuojiaji* lines (vertebral edge line of the spine) and/or the Governing Vessel (GV) that are found in five element regions (see Exhibit B for division of Back Five-Element Zones). Treatment sequencing follows four forms that follow the creative cycle. All individual acu-points are treated on the healthy or less reactive side (Steps 5, 8, 11 and 13 as shown above).

In SJT, a practitioner checks reference points

which are exhibited as symptoms and signs. They include the patient's complaints and what a practitioner observes with the senses — sight, sound, touch, pulse, palpation, etc. Reference points mirror fundamental cold. During treatment the practitioner re-checks the reference points for change. For example, a patient comes in with back pain and during the treatment the pain lessens which means that there is less cold in the body and that the *jing qi* has been successfully tonified. Because the practitioner rechecks reference points during the treatment process, he/she can alter strategies resulting in a better outcome.

Contact needling begins the core of the fundamental treatment process starting with the abdomen and moving to the back. The SJT needle (or *teishin*) is used to lightly stimulate the abdomen from superior to inferior in a zigzag fashion without regard to acupuncture points or channels. It looks similar to *sanshin*, a touching needle technique, but its effect is one of tonification rather than dispersion. Contact needling is best understood by its visual presentation in the DVD.

Much of SJT's diagnostic and treatment perspectives were originally published in my article from the North American Journal of Oriental Medicine— *Shakuju Therapy Seminar (Part 2): Clinical Application*, NAJOM, Volume 16, Number 45 (2009, March), pp. 34–37.

Clinical Perspective

ACT offers clinical strategies and cases illustrating its approach to treatment. This information is helpful to both the novice and experienced practitioner. It offers perspectives that enhance treatment flow and nuances that may be overlooked. The DVD helps to paint a clearer picture of the diagnostic and treatment process discussed in ACT.

Conclusion

Shakuju Therapy offers a unique approach to acupuncture. It is guided by the premise that disharmony/disease can be classified as an expression of cold/*hie*, resulting in *jing qi* deficiency. The treatment approach is systematic, simple, and entails minimal stimulation to the patient. Its goal is to restore balance by warming the cold in the body through tonification of *jing qi*. Furthermore, the practitioner can easily refine treatment by repeatedly checking for patient feedback through reference point evaluation. The results foster longer-lasting healing than any other form of acupuncture I have practiced or witnessed.

Kobayashi Sensei's book and DVD provides a thorough basis for understanding this unique form of acupuncture and is an excellent reference for all those looking to add it to their practice.

In conclusion, I wish to express my deep gratitude to Kobayashi Sensei, as well as the editors of KAIM for the opportunity to write this article.

Book, DVD and Seminar Information

Book Reference and DVD: Kobayashi, Shoji. (2008). *Acupuncture Core Therapy – Shakuju Chiryō*, Translated and Edited by Dan Kenner. Taos, New Mexico: Paradigm Publications. Contact Redwing Books to purchase the book and DVD <http://www.redwingbooks.com/Browse.jmdx>.

Seminar: Ellen Leifman, Shakuju Association of North America eleifman@gmail.com

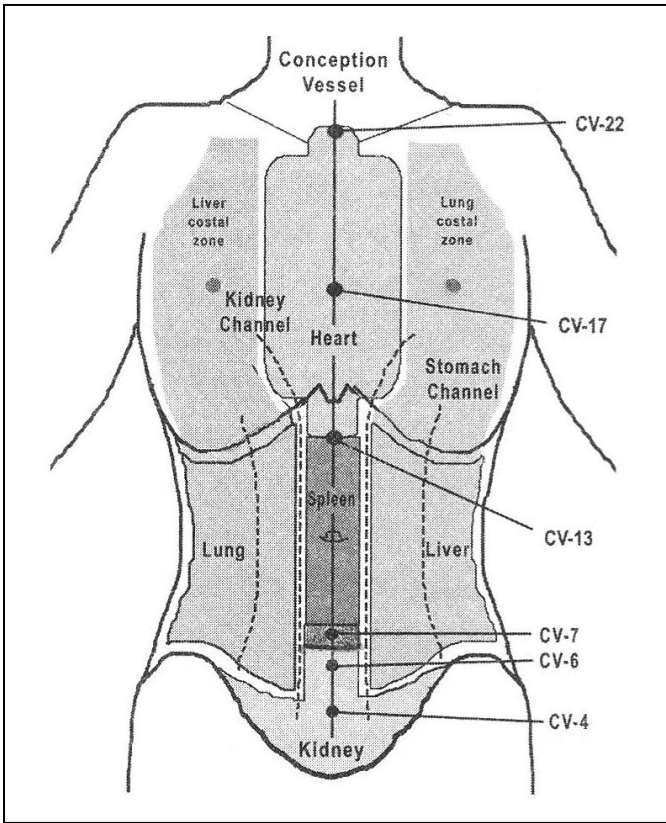


Exhibit A

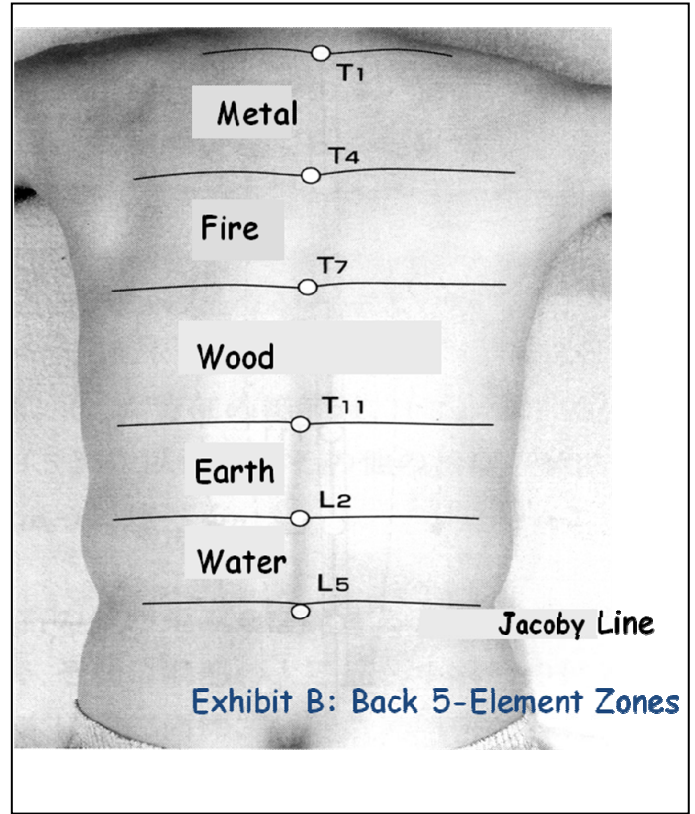


Exhibit B